## **Client Checklist**

WHEN:	The Client Checklist Form is	placed in the front of the

chart at the time of admission to services. Each item on the list is signed off and dated upon the completion of the requirement. If an item is not applicable, N/A should be written in the signature line and date the

entry.

**ON WHOM:** All clients receiving services at the time of admission

to a program.

**COMPLETED BY:** Any staff.

**MODE OF** 

**COMPLETION:** Legibly handwritten signatures and dates on the

HHSA:MHS-112.

**REQUIRED** 

**ELEMENTS:** All applicable items.